

BEST AVAILABLE COPY

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 529957 RECEIPT DATE: 04 / 21 / 00
IA NUMBER: PCT/ SE98 / 01914 IA FILING DATE: 10 / 22 / 98
FAMILY NAME: HERTZMAN DELAY WAIVED (Y/N): Y
GIVEN NAME: MIKAEL DEMAND RECEIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 10 / 22 / 97
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: 44662-59506 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000466 TELEPHONE 7035212297
NAME: YOUNG & THOMPSON FAX
STREET: 745 SOUTH 23RD STREET 2ND FLOOR
CITY: ARLINGTON
STATE/COUNTRY: VA ZIP: 22202
EMAIL:
APPLICATION TITLES:
CONTACTLESS MEASURING OF POSITION AND ORIENTATION

TAB TO LAST POSITION, PUSH SEND

BEST AVAILABLE COPY



Bib Data Sheet



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office

Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

SERIAL NUMBER 09/529,957	FILING DATE 04/21/2000 RULE _____	CLASS 382	GROUP ART UNIT <i>2721 2623</i>	ATTORNEY DOCKET NO. 44662-59506
-----------------------------	---	--------------	--	------------------------------------

APPLICANTS

MIKAEL HERTZMAN, SOLLENTUNA, SWEDEN;
TROY LANE BROWN, CRYSTAL LAKE, IL;

**** CONTINUING DATA**

THIS APPLICATION IS A 371 OF PCT/SE98/01914 10/22/1998

**** FOREIGN APPLICATIONS**

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/31/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY SWEDEN	SHEETS DRAWING 4	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Signature	Initials				

ADDRESS

000466

TITLE

CONTACTLESS MEASURING OF POSITION AND ORIENTATION

FILING FEE RECEIVED 988	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
----------------------------	---	---